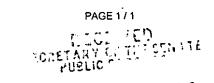
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FEC FORM 2 STATEMENT OF CANDIDACY



				+7-	1111 25 P
(a) Name of Candidate (in full)					
Bohren, Jensen, , Mr.,	Charle if address shooped		2. Candidate's FEC Iden	tification Nu	ımber
(b) Address (number and street) 69 The Pines	☐ Check if address changed				
(c) City, State, and ZIP Code	MS 3903	•	3. Is This Ne X (N)		Amended (A)
Benton		=	trict of Candidate		lad (*)
Party Affiliation DEMOCRATIC PARTY	5. Office Sought Senate	MS	00		
· · · · · · · · · · · · · · · · · · ·	ESIGNATION OF PRINCIPAL	CAMPAIG	N COMMITTEE		
				electio	n(a)
	amed political committee as my Principal		(year of elect		ai(e).
NOTE: This designation should be	filed with the appropriate office listed in t	he instructions.			
(a) Name of Committee (in full)					
Southern Progress	ives for J. Bohren				
(b) Address (number and street)					
69 The Pines					
(c) City, State, and ZIP Code					
Benton		MS	39039		
 I hereby authorize the following na candidacy. 	amed committee, which is NOT my princip	Jai Campaign Co	minimize, to receive and ex		• ,
NOTE: This designation should be	e filed with the principal campaign commit	tee.			
(a) Name of Committee (in full)					
(b) Address (number and street)					
(c) City, State, and ZIP Code					
Logrify that I have a	xamined this Statement and to the best o	f my knowledge	and belief it is true, correct	and compl	ete.
	Xamined this oldieness and to the		Date		
Signature of Candidate			05/31/2017		
Bohren, Jensen, , Mr.,			05/31/2017		
		· · · · ·			
NOTE: Submission of false, erroneo	us, or incomplete information may subject	t the person sign	ning this Statement to pena	Ities of 2 U.	S.C. §437g.
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J. Bohren 69 The Pines

Benton, ms 39039

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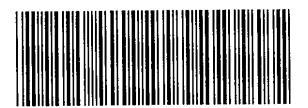
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